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02/27/02
jc923 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	500.41299X00
		First Inventor	HOSOKAWA, NOBORU
		Title	VIDEO TRANSMISSION APPARATUS FOR CONNECTING TO A NETWORK
		Express Mail Label No.	

APPLICATION ELEMENTS SEE MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27	8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification <i>(preferred arrangement set forth below)</i>	a. <input type="checkbox"/> Computer Readable Form (CRF)
-Descriptive title of the invention	
-Cross Reference to Related Applications	
-Statement Regarding Fed sponsored R & D	
-Reference to sequence listing, a table, or a computer program listing appendix	
-Background of the Invention	
-Brief Summary of the Invention	
-Brief Description of the Drawings (<i>if filed</i>)	
-Detailed Description	
-Claim(s)	
-Abstract of the Disclosure	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages: 36]	i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
5. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy)	ii. <input type="checkbox"/> paper
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i>	c. <input type="checkbox"/> Statements verifying identity of above copies
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)	
6. <input type="checkbox"/> Application Data Sheet See 37 CFR 1.76	9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & documents(s))
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i>	<input checked="" type="checkbox"/> Power of Attorney
11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
13. <input type="checkbox"/> Preliminary Amendment	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i) Applicant must attach form PTO/SB/35 or its equivalent
17. <input checked="" type="checkbox"/> Other. Eigs. 1-5, 6a-g, Credit Card Payment Form	

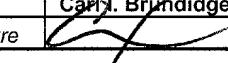
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No :

Prior application information Examiner: _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		020457 <i>(Insert Customer No. or Attach bar code label here)</i>	or <input type="checkbox"/> Correspondence address below	
Name	ANTONELLI, TERRY, STOUT & KRAUS, LLP			
Address				
City		State		Zip Code
Country		Telephone	(703) 312-6600	Fax (703) 312-6666
Name	Carolyn Brundidge			Registration No. (Attorney/Agent) 29,621
Signature				Date February 27, 2002

Burden Hour Statement: This form is estimated to take 2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

J1017 U.S. PTO
10/08/351
02/27/02

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

		Complete if Known	
		Application Number	
		Filing Date	February 27, 2002
		First Named Inventor	HOSOKAWA, NOBORU
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$)	780.00
ATTORNEY DOCKET NO.		500.41299X00	

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																																																																																																																													
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit overpayments to: Deposit Account Number 01-2135 Deposit Account Name Antonelli, Terry, Stout & Kraus, LLP <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant Claims small entity status See 37 CFR 1.27		3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th colspan="3">Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>105</td> <td>130</td> <td>205</td> <td colspan="3">65 Surcharge – late filing fee or oath</td> <td></td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td colspan="3">25 Surcharge – late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td colspan="3">130 Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td colspan="3">2,520 For filing a request for ex parte reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td colspan="3">920* Requesting publication of SIR prior to Examination action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td colspan="3">1,840* Requesting publication of SIR after Examiner action</td> <td></td> </tr> 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**or number previously paid, if greater; For Reissues, see above.

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

40.00

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Carl I. Brundidge	Registration No. (Attorney/Agent)	29,621	Telephone	703-312-6600
Signature				Date	February 27, 2002

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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